46 Developing a Multi-Focal Mass Casualty Drill to Test Surge Capacity of Prehospital and Community Hospital Resources

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Background: Prehospital and emergency department (ED) providers must be prepared to respond to mass casualty incidents (MCI). However, in the modern era of ED boarding and staffing shortages, prehospital and ED personnel must be prepared to manage high volume and high acuity patients with limited resources.

Objectives: Introduce ACGME EMS/Disaster milestones to EM residents and evaluate the response of an academic hospital and community EMS system to a simulated local disaster.

Curricular Design: Participants included EM residents, EMS fellows, EM attendings, state and local EMS providers, local simulation/EMT training programs, nurses, ED techs, and security. The cost of the drill was $550. Prehospital participants were drawn to a scene where a terrorist drove a vehicle through a crowd during a parade. Live actor and manikin patients included both adults and pediatrics. Some patients deteriorated, including two that required intubation/surgical airways. Patients were transported by three ambulances, EMS fellow vehicles, and POVs. In the ED, only two resuscitation bays and four rooms on opposite sides of the ED were put in play to simulate surge capacity. Staff improvised by using fast-track beds for yellow patients and a waiting room area for green patients. Some patients decompensated, necessitating procedures and transfer.

Effectiveness: All 27 patients were triaged, treated, and transported in 76 minutes. Despite challenges, ED staff were then able to disposition all 27 patients from the ED. Following the drill, a survey was sent to participants using a scale of 1 (worst) to 10 (best). 92% of participants rated their perceived preparedness for a future MCI as ≥ 5 (Fig 1). When asked how well the team worked together, 90% of participants responded ≥ 5 (Fig 2). One area to improve includes communication flow during the event, with 37% of participants rating ≤ 5 (Fig 3). Future drills will test different stressors and focus on communication.

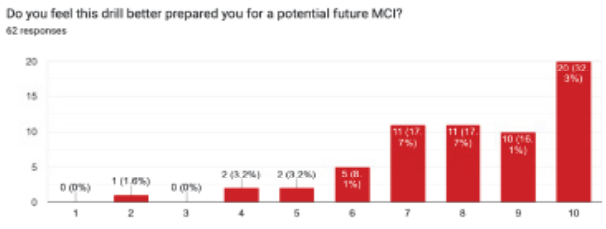

Figure 1. Survey results, scale of 1 (worst) to 10 (best) of preparedness for a future MCI.

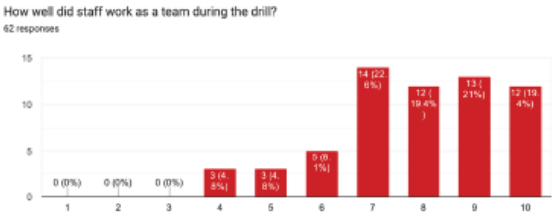

Figure 2. Survey results, scale 1 (worst) to 10 (best) regarding teamwork during the drill.

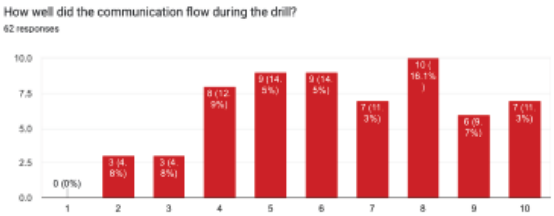

Figure 3. Survey results, scale of 1 (worst) to 10 (best of communication flow during the drill.

47 Social Media Trends By Program Type and Geographic Region in Emergency Medicine Residencies

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Background: With the number of EM residencies increasing alongside a decline in applicants from U.S. medical schools, EM programs increasingly compete for student recruitment. Social media (SM) plays a key role in program branding and recruitment. Challenges in the recruitment process are diverse, contingent on both the geographic location and setting of training. Understanding current SM trends relative to these factors is not well-studied.

Objective: This study aims to quantify and describe trends in SM activity for EM residencies based on geographic region and program type. We hypothesize that regions with more programs and those self-described as academic will have a more robust SM presence.

Methods: Using the EMRA Match site, we investigated 239 unique EM residency programs to quantify and analyze SM activity during the study period (September 2022 to August 2023), focusing on Twitter (X) and Instagram (IG). This analysis, based on self-reported data from each institution, factored in both geographic region and program type, which includes academic, community, or county settings. Content, engagement, and composite scores were calculated for each.

Results: Table 1 shows SM activity by geographic region and program type. SM activity correlated with the number of programs in a region; however, certain regions have disproportionately more program-driven activity relative to

engagement (Figure 1). Academic programs have the most prominent SM presence. Compared to X, IG is more frequently used by programs, generates more engagement, and has higher composite scores.

Conclusion: While there is overall favorability of IG over X across programs, academic settings and regions with more residencies have a more prominent SM presence. In addition, program-driven content does not always correlate with engagement, thus highlighting a potential opportunity for growth and further investigation, especially as it relates to recruitment.

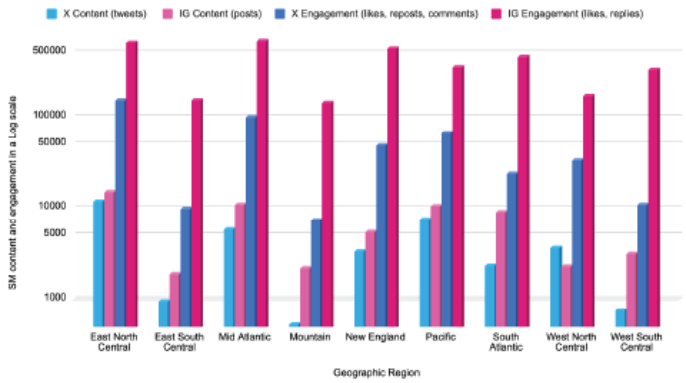

Figure 1. Emergency Medicine Residency social media activity by geographic region.

Table 1. Emergency Medicine Residency Program activity on Twitter (X) and Instagram (IG) by geographic region and porgram type.

Geographic Region	Programs in Region (%)	X Content (tweets)	IG Content (posts)	X Engagement (likes, reposts, comments)	IG Engagement (likes, replies)	X Composite Score (tweets, likes, posts, comments)	IG Composite score (posts, likes, replies)
East North Central	49 (20.5)	1174	1499	15236	65629	16410	67128
East South Central	12 (5.0)	94	185	975	15338	1069	15523
Mid Atlantic	60 (25.1)	572	1072	9903	68283	10475	69355
Mountain	10 (4.2)	52	216	720	14328	772	14544
New England	11 (4.6)	328	540	4878	55518	5206	56058
Pacific	22 (9.2)	745	1046	6707	34366	7452	35412
South Atlantic	41 (17.2)	232	900	2370	44816	2602	45716
West North Central	10 (4.2)	363	226	3294	17041	3657	17267
West South Central	24 (10.0)	76	313	1070	32643	1146	32956
Program Type	Programs (%)	X Content (tweets)	IG Content (posts)	X Engagement (likes, reposts, comments)	IG Engagement (likes, replies)	X Composite Score (tweets, likes, posts, comments)	IG Composite score (posts, likes, replies)
Academic	83 (47.3)	2335	3124	5306	180205	7641	183329
Community	113 (34.7)	632	212	29586	99697	30218	99909
County	33 (13.8)	790	818	10261	64021	11051	64839
Unspecified	10 (4.2)	0	35	0	1485	0	1520

48 Navigating the EM Calendar: An Analysis of EM Residency Programs on Social Media

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Background: In the decade since publication of CORD best practices for social media (SM) use, EM residency programs embraced SM as more than an educational tool, leveraging it for branding and recruitment. Strategic use of platforms like Twitter (X) and Instagram (IG) by EM programs throughout the academic year remains understudied.

Objective: This study reports monthly X and IG activity by EM residency programs. We hypothesize that fluctuations in SM activity align with key residency calendar events.

Methods: Using the EMRA Match site, 239 unique EM residency programs were evaluated for the presence of and engagement on SM from September 2022-August 2023. A composite score was created to capture overall SM engagement, calculated by the sum of monthly likes, comments and reposts divided by total monthly posts for X and likes and comments divided by total monthly posts for IG. The monthly posts and composite engagement scores were then compared to the EM academic calendar to evaluate for temporal trends.

Results: There were notable variations in SM posts and engagement when compared to crucial milestones in the EM academic calendar. Overall, posting and engagement on IG was higher than X. Both platforms exhibited increased posts at the time of NRPM Match 2023 (Figure 1). X engagement was highest at the end of recruitment season. There was a general trend in increased IG engagement over time, particularly during graduation and when welcoming new interns but not at the time of the match. (Figure 2)

Conclusion: We note a correlation between EM residency SM activity and the academic calendar that varies by SM platform. Strategic peaks during the end of recruitment/match (February/March), and graduation and intern orientation (June/July) highlight thoughtful alignment that may be purposeful to optimize SM engagement. Understanding these temporal trends may aid programs to optimize their SM impact as well as identify opportunities to increase future engagement.

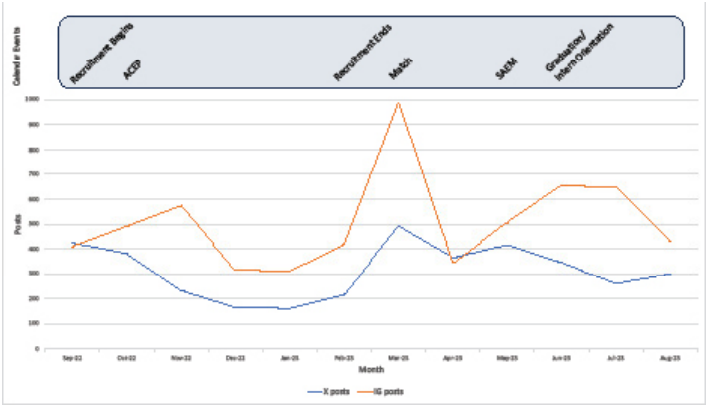

Figure 1. Monthly total posts on Instagram (IG) ad Twitter (X) by Emergency Medicine Residency Program.